

High School Scholarship Application – 2023

DEADLINE: Must be postmarked or e-mailed no later than Saturday, April 1, 2023

IMPORTANT INFORMATION

*Application MUST be typed in English.

*Application MUST be complete including all requested information.

(See checklist included in application.)

*Application may be mailed or e-mailed.

*If any questions, please contact us through:

presidentsanduskyzonta@gmail.com



High School Scholarship – 2023

Application must be postmarked/e-mailed no later than Saturday, April 1, 2023

Application may be mailed to:

Zonta Club of Greater Sandusky, P.O. Box 1222, Sandusky, OH 44871-1222 or e-mailed to: presidentsanduskyzonta@gmail.com

Name:		
Last	First	Middle Name/Initial
Mailing Address:		
City:	Zip Code:	_Birth Date – Mo/Date/Year:
Telephone: ()	E-Mail Address:	:
Name of School currentl	ly attending:	
School Address/City/Zip	Code:	
including whether and/o	narrative your anticipated cor how you plan to be active	AL GOALS ourse of study and current career interest, in volunteer or community organizations. t at the end of your answer in space provided.
		Word Count:
my knowledge and that I understand that at the candidate for the Zonta Contact of the Zonta C	of the information contained I did not receive assistance in option of the Zonta Club spo Club of Greater Sandusky H	N OF APPLICANT I in my application form is accurate to the best of in completing the essay portions of this application. onsoring the scholarship, I may be interviewed as a High School Scholarship. I consent to the hard copy e Zonta Club of Greater Sandusky.
Date:	Signat	ure:

Last Name	First Name	Middle Name/Initial
• Preference will be given t	ns below, noting the word limit for ea to those applications who observe the ion, all questions are rated in equal v	e word restrictions.
	r answer in space provided. Answers	than 200 words. Please provide the s must be typed. A separate sheet may
Student Activities and Your about your participation in these		nat you find the most rewarding or valuable
		Word Count:
- paid or unpaid. Describe th	•	t benefit your community. Please describe ernational project and experience.
		Word Count:
through service and advocacy. A	d States and worldwide. Describe your Are there any issues which hinder wome ideas as to how they should be resolved.	en's empowerment in the United States
		Word Count:
Checklist to be completed b	y applicant: pplication: Three (3) pages; Typed	l in English
School Trans	script: Verification of current enro	llment signed by school official.
	idential recommendation letters wi o must be provided with application	0
		o later than Saturday, April 1, 2023.



Scholarship Recipient's News Release Information | Photo must be provided

Name:			
	Last	First	Middle
Age:	GPA (on 4.0 scale):_	Rank In Class:	out of
High School fi	rom which you will graduate:		
~ .	ill be attending: /City/State		
Your planned	major:		
Parent(s)/Guar	rdian(s) Name(s):		
Addre	ss/City/State:		
Parents(s)/Gua	ardian(s) Names(s):		
Addre	ss/City/State:		
List any honor	rs you have received in high sch	ool – school and commu	nity:
List the high so	chool and community activities	in which you are/were in	volved:
NOTE: A rec	ent photo of yourself <u>MUST</u> b	e provided with this for	rm.
I give my pern	nission for this information and	my picture to be released	d with the news release to media.
Parent	/Guardian Signature	Stude	ent Signature
Date		Date	